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Under the Paperwork Baduction Ast of 1990, no parsons are required to respond to a collection of information unless it atsiptays a valid CMM control number Effective on 12/08/2004 Complete if Known Fees purpuant to the Consolidated Appropriations Act, 2005 (H.R. 4618) Application Number 10/593,407 FEETRANSMITTA Filling Date January 29, 2007 For FY 2009 First Named Inventor David P. Fairlie Examiner Name Julia Ha Applicant claims small scrity status. See 37 CFR 1.27 Art Unit 1654 TOTAL AMOUNT OF PAYMENT 555,00 Attorney Docket No. 09784.8018.US00 METHOD OF PAYMENT (check all that apply) Coodit Card J Money Order Nose L Ditter (please identify): ✓ Degrasit Account Gepowi Account Number 50-2283 Deposit Apenint Name PERKINS COIE LLP For the above-identified deposit assisunt, the Director is hereby authorised to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filling top Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included an this form. Provide credit eard information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH FEES **EXAMINATION FEES** Small Entity Small Sptity Mail Emity Application Type Fee (\$) Fee (\$) Fees Paid (S) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Udliny 330 165 540 270 220 110 Design 220 190 310 30 140 70 Plant 220 110 330 165 170 83 Roissue 330 165 540 270 650 325 Provisional 220 80 0 0 8 2. EXCESS CLAIM FEES Small Entity Fee Description Fee (\$) Fee (\$) Each claim over 20 (including Reissups) 32 26 Bach independent claim over 3 (including Reissues) 110 220 Multiple dependent claims 390 195 **Total Claims** Extra Claims F20 (\$) Fee Paid (\$) Muitiple Dependent Claims • 20 or HP ≈ × Fee (5) Foe Paid (\$) HP is highest number of total claims paid for, if greater than 30 indep. Claims Extra Claims Fee (\$) Fee Paid (\$) -3 or HIP > X = 7 HIP = highest number of independent claims paid for, if greater truer 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer fistings under 37 CPR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Number of each additional 50 or fraction thereof 750 × x (round up to a whole number) x 4. OTHER FEE(S) Fees Paid (S) Non-English Specification. \$130 fee (no small entity discount) Other (e.g., late filing surcharge): Extension of Time (3mins) 585,00 SUBMITTED BY Registration No. 48,511 Signature Telephone 202-654-8200 (Attorney/Agent) Joseph W. Ricigliano Date Deleamber 29, 2016 This collection of promises is required by 37 CFR 1.135. The information is required to obtain or retain a benefit by the public which is to the (and by the

This collection of gformation is required by 37 CFR 1.135. The information is required to obtain or retain a benefit by the public which is to the said by the USPTO to proceed an application. Considering it is governed by 35 U.S. C. 122 and 37 CFR 1.14. The inflection is extincted to take 30 principles to including gathering, preparing, and submitting the complete deposition from to the USPTO. Time will vary depending upon the inclinative case. Any comments on the assenting this process to complete this form ancies suggestions for reducing this burden, should be sent to the Crise Information Officer, U.S. Patern and Tradement Office, U.S. Department of Commission Officer, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TQ: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.